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INDICATION FORM**

Application Number	09/921,066
Filing Date	August 2, 2001
First Named Inventor	Thomas H. Foster
Title	MRI-COMPATIBLE IMPLANTABLE DEVICE ✓
Art Unit	3762
Examiner Name	G. Evanisko
Attorney Docket Number	1008 033 302 0251

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
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Michael J. Nickerson	33,265

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

☒ Please recognize or change the correspondence address for the above-identified application to:

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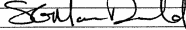
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	06 Apr 06
Name	Stuart G. MacDonald	Telephone	(585) 214-2448
Title and Company	Vice President R & D: Biophan Technologies, Inc.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of _____ forms are submitted.

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